PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

26/607

	. •		SMALL ENTITY			OTHER THAN						
(Column 1) (Column						ımn 2)		TYPE [OR	•	
TOTAL CLAIMS			14					. RATE	FEE	7	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20= *		• 17			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS minus 3 =				inus 3 =	6			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	ı	TOTAL	<u> </u>	OR	TOTAL	マフル
CLAIMS AS AMENDED - PART II									<u> </u>		OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	· .	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JUIPLE DE	PENDENI	CLAIM			+145=	21	OR	+290=	
							L	TOTAL		اما	TOTAL	
(Column 1) (Column 2) (Column 3)							A	DDIT. FEE		10	ADDIT. FEE	
	 .	CLAIMS		HIGHE		(Column 3)	ı		4001	1 1	·	4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=.		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-					
								+145=		OR	+290=	
							AI	TOTAL ODIT. FEE		OR ,	TOTAL ODIT. FEE	
		(Column 1) (Column 2) (Column 3)										
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	H	X43=		1	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	X40=		OR	X00-	
• 14	the entry in colum	nn 1 is loss than the			ne :		L	+145=	. <u> </u>	OR	+290=	
** 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL DIT FEE		OR	TOTAL	
***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												